PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/572,954		Filing Date 06/10/2008		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR	N.	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	_	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (cl)	N/A		N/A	l	N/A		1	N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A	l	N/A		1	N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),	E or (q))	N/A		N/A	l	N/A		]	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =			ı	x \$ =		OR	x s =		
IND	EPENDENT CLAIM GFR 1.16(h))	IS	minus 3 =			l	x \$ =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50	vings exceed 100 ation size fee due ty) for each tion thereof. See 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL		
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	04/19/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 8	Minus	·· 21	= 0	ı	x s =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 1	Minus	3	- 0	ı	x s =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.150))		Minus		=	ı	x s =		OR	x s =		
	Independent (37 CFR 1.16(h))		Minus	***	-		X \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))								]			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "2".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  "He "Highest Number Previously Paid For IN THIS SPACE is less than 5, enter "3".												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you preparing, and sustiminary line completed applications for the Other U.S. In the wile valoperating upon the introduction of Ary documents on the amount of the Centure to complete this form and/or suggestions for freducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commence, D.O. Box 1460, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.